

Queers, junkies, and harm reduction

Abstinence isn't always a realistic option

By Evan Wood, Paula Braitstein and Naomi Brunemeyer

Harm reduction is a pragmatic approach to reducing the extent of harm caused by a problem and is undertaken when eliminating the problem is an unrealistic objective. In other words, given that a situation exists, such as having unsafe sex or injecting drugs, harm reduction is a means of reducing the negative outcomes associated with these behaviours. The most well-known example of harm reduction is the "Don't Drink and Drive" campaign, which was implemented after it became clear that youth were not responding to the "Don't Drink" campaign.

"Fags" and "junkies" have much in common when it comes to harm reduction. Many gay men use drugs, and many drug users have sex with people of the same sex. Although numerous cultural differences exist between these two groups, there are probably more similarities than differences when it comes to the bottom line: staying alive and maintaining a good quality of life. Both groups have traditionally been marginalized. Both gay men and drug users are incredibly vulnerable to HIV, hepatitis C, poverty, stigma, discrimination, and violence. Drug users also risk overdose deaths or bacterial infections from lack of access to sterile equipment. In addition, they are more vulnerable to harm when there is public consumption of drugs. People who practice unsafe sex risk acquiring sexually transmitted infections and bacterial or parasitic infections.

Harm reduction exists along a continuum. One end of the continuum for gay men's sex would be abstinence. The most successful way of reducing the harm associated with sex would be to not have sex at all, clearly an unrealistic option for most men. We know some gay men engage in bareback sex so we need to provide those gay men with options to practice safer sex, even if these strategies are risky, such as pulling out before ejaculation or using plenty of lube. The goal is to reduce harm in a way that recognizes the realities of gay men's lives.

The harm reduction continuum for injection drug users also begins with abstinence, which is not an option for most people who use drugs recreationally, let alone those who live with drug addiction. Strategies such as methadone maintenance, heroin prescription, and safe injection sites are options that some people believe encourage drug use, but these approaches actually

help people who are at the greatest risk of disease and death. If we don't provide "low threshold" harm reduction programs such as safe injection sites, we lose all opportunity to prevent harm.

Both gay men and drug users are incredibly vulnerable to HIV, hepatitis C, poverty, stigma, discrimination, and violence.

- Harm reduction strategies for injection drug users include:
- > encouraging drug injectors to not inject alone so as to avoid overdoses;
 - > needle exchange programs to promote the use of sterile syringes and encourage the return of contaminated needles; and
 - > safe injection sites, where injection drug users can use drugs safely, have their lives saved if they overdose, and where they can have access to other services including primary healthcare.
- Preventing harm to gay men engaging in sex is also paramount. These strategies include
- > sexual practices that don't involve penis-anus penetrative sex;
 - > condom use; and
 - > sex with someone of the same serostatus.

The BCPWA Society would prefer not to acquire new members. We want to stop the spread of HIV. Anything we can do to reduce the harm associated with drug use or sexual behaviour is important to BCPWA Society members.

For more information check out www.lindesmith.org/reducingharm ⊕

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